Disclosure Report Cover

MINISTER Amendment PUBLIC COPY
Yes No

Use this form for general report and committee information, must be signed and submitted along with other detailed forms. Do not use this form to update information

| Do not use this form | | te information | | | | | | | |
|--------------------------------------|------------|-------------------------|-----------------------|-----------------|---------------------------------------|---|--|--------------------------|----------------------------------|
| 1. Committee Infor | mation | | | | | | | c. ID Number | |
| a. Full Name | | | | | · · · · · · · · · · · · · · · · · · · | | | C ID I tumber | |
| Nancy for Mayor C | ampaign | Committee | | | | | | | |
| | | 0. 1. 17. 0.15 | | | | | | d. Date Filed | |
| b. Mailing Address (inc | lude City, | State and Zip Code) | | | | 1 1 2 2 2 2 3 3 3 3 3 3 3 3 3 3 3 3 3 3 | 1264 4 3 4 5 5 5 5 5 5 5 5 5 5 5 5 5 5 5 5 | | |
| 185 Everett Road | | | | | | | | 10/13/201 | 1 |
| Pinehurst, NC 2837 | 4 | | | | ก | r 1 | 3 2011 | | |
| | | | | | *1 | 11,5 | · • ZWII | e. Phone Number | |
| | | | | | d. | 1 P 16 | to RATE | (910)-295-0 | 534 |
| | | | | | | | * ** * * | ()10)-233 3 | |
| | | | | 4. Period E | nd Da | te | 5. Treasurer Ful | l Name | · |
| 2. Report Year | 3. Perio | od Start Date (mm/d | d/yy) | (mm/dd/yy) | | | | | |
| 2011 | | 07/01/2011 | | 09/27/20 | 011 | | Robert E. Tweed | | |
| | 400 (CH | | Q Tu- | pe of Report | (c | heck o | only one type of repor | t from one category |) |
| 6. Type of Commit | | | Munici | | | | /County | Referendum | |
| Candidate Camp | | | | Organizational | | | Organizational | Organization | al |
| PAC Independent | | | | • | | | Quarterly | Pre-referendu | um i |
| Expenditure | | Joint Fundraiser | | Thirty-five day | | | Quarterly | | |
| Legal Expense I | | | | | | | T7:4 | ☐ Final | |
| 7. Type of Fund | (if appl | icable, check one) | | Pre-primary | | ᄖ | First | Supplementa | l Final |
| Booster Fund" | | • | | Pre-election | | | Second | Armual | |
| Building Fund | | | | Pre-runoff | | | Third Fourth | Special | |
| _ | | | | Semi-annual | | | Fourth Semi-annual | Li Special | |
| | | | │ ∐ | Mid Year | | | | 10. Special Rep | ort Name |
| Other: | | | | Year End | | 님 | Mid Year | 10. Special Rep | OTE TAILING |
| | | | | Final | | Year End | | | |
| 8. Number of Fund | draisers | this Report | ļ 🗆 | Special | | | Final | | |
| | 0 | | | _ | <u> </u> | | Special | | |
| 11. Account Inform | | | 21 | | | | t Information | | |
| a. Financial Institution | | e | | | a. Fina | ncial I | nstitution Full Name | | |
| Crescent State Ban | | | | | | | | | |
| b. Purpose | | c. Account Code | | | b. Pur | pose | | c. Account Code | |
| Checking Account | for | | | | | | | | |
| Campaign Receipts | | 1 | | | | | | | |
| Disbursements | | 1 | | | | | | | |
| Bibbbibania | | | | | | | | 1 7 1 7 1 7 1 | Delenas |
| | ľ | d. Period Begin Balanc | e | | | | | d. Period Begin | DAIMINE |
| | ľ | \$ \$1250.00 | | | | | | \$ | |
| | 1 | \$ \$1250.00 | | | <u></u> | | <u></u> | | |
| CERTIFICATION I certify that the Co | | or Fund is in compl | iance w | ith all applica | ble pro | ovision | ns of Article 22A, 22 | B, & 22D-22M of C | hapter 163 of hat this report is |
| Alex MIC Compred Sto | tutae and | d that no fitteds are c | ommins | gied with bron | րըուցա | ա սա | ici iloli-disciosca ianc | 35. 1 10:11:01 00:11:1 0 | |
| complete, true and | correct a | and that I have been | rained | by the NC M | LE DON | الدين | Zigonono. | 10/13/2011 | |
| Robert E | Tweed | 137 00: | | | ionature | of App | ointed Treasurer | Date | |
| | | ed Name of Signer | | | ignatme | ar urhh | | | |
| FOR OFFICE USE | UNLY | -1-1 | | | | 18 | and. | Delivery Method | |
| Date Received | l : | 10/13/11 | | Employee: | | V | ON . Capacity | ☐ Normal Ma | |
| | | | | | | | | Registered | |
| Date Postmark | red: | | • | Employee: | | | | Hand Deliv | |
| ļ | | | | | | | | ☐ Electronica | |
| Date Scanned: | | | • | Employee: | | | | | not received |
| | | | | | | | | mandatory | training |
| Date Data Ent | ered: | | • | Employee: | | | | | |
| TO 37 : - | | | mond c | ammittee info | rmatio | n sucl | n as the committee ad | dress, treasurer, ass | stant treasurer, |
| Please Note: I | | auetac | lian At'h | vooks intorma | tion. O | r acco | uni momation. | | |
| | 3.7 | CUSTOC | J IU IIpii Amant (| of Organizatio | n (CR) | O-210 | 0A-E) to make comm | nittee changes. | |
| 1 | You | must amend the Stat | ement (| V OI Rainzacio | (| | | | August 200 |

NC State Board of Elections

Detailed Summary Use this form to summarize all disclosure reporting forms and to total monetary information. 3. ID Number 1. Committee Full Name (and Fund if applicable) 2. Type of Report Nancy for Mayor Campaign Committee 2011 35-Day Report Total this Total this 2011 Start of Election Cycle: January 1, **Election Cycle** Reporting Period \$0 \$ \$1 250.00 Cash on Hand at Start RECEIPTS \$207.00 \$ \$ \$207.00 **Aggregated Contributions from Individuals** (CRO-1205) \$7 264.00 \$ \$ \$6 014.00 (CRO-1210) Contributions from Individuals 6) \$ \$ Contributions from Political Party Committees (CRO-1220) 7) \$ \$ Contributions from Other Political Committees (CRO-1230) 8) \$ (CRO-1410) Loan Proceeds 9) \$ Refunds/Reimbursements To the Committee (CRO-1240) 10) 11) Other Receipt Sources \$ (CRO-1250) 11a) Interest on Bank Accounts \$ \$ 11b) Contributions from Not-for-Profit Organizations (CRO-1250) \$ \$ (CRO-1250) 11c) Outside Sources of Income \$ \$ (CRO-1270) 11d) Legal Expense Fund - Other Sources \$ \$ (CRO-1265) 11 e) Exempt Purchase Price Sales \$ \$7 471.00 \$ \$6 221.00 TOTAL RECEIPTS (Add lines 5, 6, 7, 8, 9, 10, 11a, 11b, 11c, 11d and 11e) EXPENDITURES 13) Disbursements \$ \$1 678.00 (CRO-1310) \$ \$1 678.03 13a) Operating Expenditures \$ \$ 13b) Contributions to Candidates/Political Committees (CRO-1310) \$ (CRO-1310) \$ 13c) Coordinated Party Expenditures \$ \$ (CRO-1315) 14) Aggregated Non-Media Expenditures \$ \$ (CRO-1420) 15) Loan Repayments \$ \$ Refunds/Reimbursements From the Committee (CRO-1320) 16) \$ \$1 471.00 \$1 471.00 \$ (CRO-1510) In-Kind Contributions 17) \$ \$3 149.03 \$ \$3 149.03 TOTAL EXPENDITURES (Add lines 13a, 13b, 13c, 14, 15, 16 and 17) 18) \$4 321.97 \$4 321.97 \$ Cash on Hand at End (Add lines 4 and 12 together, then subtract line 18) 19) ADDITIONAL INFORMATION

| 20) | Non-Monetary Gifts Given to Other Committees | (CRO-1330) | \$ |
|-----|---|------------|----------|
| 21) | Outstanding Loans (incl. ones from other campaigns) | (CRO-1430) | \$ |
| 22) | Debts and Obligations owed By the Committee | (CRO-1610) | \$ |
| 23) | Debts and Obligations owed To the Committee | (CRO-1620) | \$ |
| 24) | Account Transfers Within the Committee | (CRO-1720) | \$ |
| 25) | Administrative Support | (CRO-1710) | \$ \$ |
| 26) | Forgiven Loans | (CRO-1440) | \$ \$ |
| 27) | 48-Hour Notice Reports Sum | (CRO-2200) | \$ \$ |
| 281 | Contributions to be Refunded | (CRO-1215) | \$ \$ |

Contributions to be Refunded

MOORE COUNTY PUBLIC COPY

| 1 | Con | trihi | itiane | s from | Ind | ividi | ıale |
|---|-------|--------|--------|-----------|-----|-------|------|
| М | L .WH | LI III | |) II VIII | unu | wu | aais |

| | | 1541 | (A 26 2 2 1-1 | Care Mariana a | 2 67.4 | | |
|---|-------|--------------|---------------|----------------|-------------|-------|------|
| | | - | | • | Amen | dment | |
| Contributions from Individuals | Pg | | of | | \boxtimes | Yes | No |
| Use this form to report individual contributions over \$50 or contributions | under | \$50 if form | 1 CRO | 1205 is not | used | | |

| 1. Committee Full Name (and Fund if applicable) | | | | | | | 2. ID Number | | | | |
|---|-----------------------|--------------------|--------------|-----------------------------------|-------------|---------|-------------------------|----------------|------------|---------|--|
| | r Mayor Campaigr | | | | | | | | | | |
| | butor Informatio | | \boxtimes | Add | | Remo | ove | | | | |
| | ıe, Mailing Address & | | | b. Job Title/Profession | | | | d. Comments | | | |
| (include | city, state, & zip) | | | Retire | d - Teacl | ner | | | | | |
| Margaret | | | | | | | | | | | |
| 120 Brook | | | | | | | | | | • | |
| Pinehurst | , NC 28374 | • | | <u> </u> | | | 10 77 11 | | | | |
| | | | | c. Emplo | yer's Nan | ne/Spec | eific Field | | | | |
| | | | | | | | | e. Election Si | um to Date | | |
| • | | | | | | | | \$ | \$80.00 | | |
| f. Prior | g. Account Code | h. Form of Payment | i. In-K | ind Descri | iption | | j. Date (mm/dd/yy | yy) | k. Amount | | |
| | 1 | In-Kind | Wine | and Che | eese | | 09/25/2011 | | \$ \$8 | 0.00 | |
| | | | | | | | | | \$ | | |
| | | | | | | | | | \$ | | |
| 3. Contri | butor Informatio | n | \boxtimes | Add | | Remo | ove | | | | |
| | re, Mailing Address & | | | b. Job T | itle/Profes | sion | | d. Comments | 8 | | |
| | city, state, & zip) | | | Retired | d - CPA | | | | | | |
| Karyn L. | | | | | | | | | | | |
| 40 Glasgo | | | | | | | | | | | |
| Pinehurst, | , NC 28374 | | | | | | | | | | |
| | | | | c. Employer's Name/Specific Field | | | | | | | |
| | | | | | | | | e. Election S | um to Date | | |
| | | | | | | | | e, Election S | | | |
| | | | | | | | | \$ | \$ 250.00 | <u></u> | |
| f. Prior | g. Account Code | h. Form of Payment | i. In-K | ind Descri | iption | | j. Date (mm/dd/yy | yy) | k Amount | | |
| | 1 | Check | | | | | 09/26/2011 | | \$ \$ 25 | 50.00 | |
| | | | <u> </u> | | • | | | | \$ | | |
| | | | | | | | | | \$ | | |
| 3 Contri | butor Informatio | n | \boxtimes | Add | П | Remo | ove | | | | |
| | e, Mailing Address & | | | | itle/Profes | | | d. Comments | s | | |
| | rity, state, & zip) | | | | d - Insur | | - | | | | |
| George E | | | | | | | | | | | |
| 7 Lake Vi | | | | | | | | | | | |
| Pinehurst, | NC 28374 | | | | | _ | | | | | |
| | | | | c. Emplo | yer's Nar | ne/Spec | eific Field | | | | |
| | | | | | | | | F1 41 G | D-4- | | |
| | | | | | | | e. Election Sum to Date | | | | |
| | | | | | | | | \$ | \$ 100.00 | | |
| f. Prior | g. Account Code | h. Form of Payment | i. In-K | ind Descri | iption | | j. Date (mm/dd/yy | yy) | k. Amount | 20.00 | |
| | 1 | Check | | | | | 09/26/2011 | | \$ \$10 | 00.00 | |
| | | | | | | | • | | \$ | | |
| | | | | | , | | | | \$ | | |
| 4. Total | only this Page | 2 | | | | | | \$ | \$ 43 | 0,00 | |

was they plan cary

| Contri | butions fron | n Individuals | | Pg | of | | ⊠ Yes | ☐ No |
|-------------|-----------------------|-------------------------|-------------|--|--------------------|----------------|-------------|-------|
| Use this f | orm to report indiv | vidual contributions o | ver \$50 | or contributions under | \$50 if form CRC |) 1205 is not | used | |
| | | and Fund if applicat | ole) | | 2. ID Number | | | |
| | Mayor Campaigr | | | 411 [7] P | | | | |
| | butor Informatio | | \boxtimes | Add Rem | ove | d. Comments | | |
| | e, Mailing Address & | i Phone | | b. Job Title/Profession Retired - Teacher | | u. Comments | | |
| Mary Elle | eity, state, & zip) | | | Retired - Teacher | | | | |
| | t Creek Road | | | | | | | |
| | NC 28374 | | | | <u>.</u> . | | | 1 |
| • | • | | | e. Employer's Name/Spe | cific Field | | | |
| | | | | | | | - 4- D-4- | |
| | | | | | | e. Election Su | m to Date | |
| | | | | | | \$ | \$ 100.00 | |
| f. Prior | g. Account Code | h. Form of Payment | i. In-K | Cind Description | j. Date (mm/dd/yyy | yy) | k. Amount | 0.00 |
| | 1 | Check | | | 09/15/2011 | | \$ 10 | 0.00 |
| | | | | | | | \$ | |
| | | | | | | | \$ | |
| 3. Contri | butor Informatio | n | X | Add □ Rem | ove | | | |
| | e, Mailing Address & | | | b. Job Title/Profession | | d. Comments | | |
| | city, state, & zip) | | | Retired - Prosecutor | | | | |
| | M. Pritchard | | | | | | | |
| 4 Georgia | . Ct , NC 28374 | | | | | | | |
| Pinenuisi, | , NC 20374 | | | c. Employer's Name/Spe | cific Field | | | |
| | | | | | · | | | |
| | | | | | | e. Election Su | m to Date | |
| | | | | | | \$ | \$ 50.00 | |
| f. Prior | g. Account Code | h. Form of Payment | i. In-K | Kind Description | j. Date (mm/dd/yy | yy) | k. Amount | |
| | 1 | Check | | | 09/15/2011 | | \$ \$5 | 0.00 |
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| | | | | | | | \$ | |
| 3. Contri | butor Informatio | n | \boxtimes | Add □ Rem | ove | | | |
| a. Full Nam | ne, Mailing Address & | Phone | | b. Job Title/Profession | | d. Comments | | |
| (include | city, state, & zip) | | | Retired - Lawyer | | | | |
| RALPH . | JACOBSON | | | c. Employer's Name/Spe | oifa Field | | | |
| | NALD ROSS DR | | | c. Employer's Name/Spe | cine rieiu | | | |
| PINEHU | RST, NC 2837 | 4 | | | | e. Election Su | m to Date | |
| | | | | | | \$ | \$ 50.00 | |
| f. Prior | g. Account Code | h. Form of Payment | i. In-k | Kind Description | j. Date (mm/dd/yy | уу) | k. Amount | |
| | 1 | Check | | | 09/15/2011 | | \$ \$5 | 0.00 |
| | | | | | | <u> </u> | \$ | |
| | | | | | | | \$ | |
| | only this Pag | | | | | \$ | \$ 20 | 0.00 |
| | of ALL CRO | | | | | \$ | \$6.0 | 14.00 |
| | | Detailed Summary Page C | RO-1100 | 0) | | <u> </u> | | |